Speaker: \ Public Hearing Testimony

February 29, 2008

Date: 2/29/08 Bill Number: 5591

Good morning Honorable Senators and Representatives

My name is Shirley Watson. I am a graduate student at the University of Connecticut, studying to obtain my Masters in Social Work. I am also a member of the National Association of Social Workers (NASW, NASW-CT), Association for the Advancement of Social Work with Groups, Inc. (AASWG), and Association for Community Organization and Social Administration (ACOSA). I come here today to testify on behalf of Bill No. 5591, "An Act Concerning Healthy Teens". I am advocating for this piece of legislation and hope that you will lend your full support behind it.

I'd like to illustrate a few important facts concerning sexual health and Connecticut's young adult population.

In 2006, 70% of Chlamydia cases in Connecticut were among young people aged 10 to 24. Left untreated, Chlamydia is a major contributor to infertility later in life. 55% of reported gonorrhea cases in Connecticut were also among people aged 10 to 24. 1

In 2004, the Connecticut Department of Public Health reported the percentage of state births to teens was 6.9%. The rate was significantly higher in Hartford (20%), New Britain (16%), New Haven (13.6%), Norwich (12.5%), Bridgeport (13.2%), Putnam (9.9%), New London (14%), Killingly (13.6%), and Windham (15.4%). While Connecticut's average rate is somewhat lower than the national average (8.4%)2, the number remains statistically significant.

Teens and young adults under the age of 25 continue to be at risk for HIV and most young people are infected through unprotected sex. 3 As asserted in the 2005 Center for Disease Control report titled, HIV Prevention in the Third Decade, African Americans are disproportionately affected by HIV infection, accounting for 55% of all HIV infections reported among persons aged 13-244. The monetary lifetime cost per person of HIV care cost averages \$618,000. This is a paltry sum when you consider the emotional and psychological costs. Not to mention the devastating impact such a diagnosis has on one's community and family.

¹ State of Connecticut Department of Public Health, Sexually Transmitted Diseases, 2006

² Retrieved on February 25, 2008 from http://www.teenpregnancy.org/resources/data/pdf/stbyst03.pdf

³ HIV/AIDS Surveillance in Adolescents and Young Adults (through 2005)

⁴CDC. <u>HIV Prevention in the Third Decade.</u> Atlanta: US Department of Health and Human Services, CDC; 2005

A Connecticut Department of Public Health survey conducted in 2005 reports that approximately 80,000 high school students have had sexual intercourse and nearly 80% had their first sexual intercourse experience between the ages of 13 and 16.5

These are glaring examples why Connecticut needs a comprehensive, age-appropriate, medically accurate program on sexual education. Comprehensive sex education teaches abstinence as the only certain way to avoid pregnancy and sexually transmitted infections; encourages family communication about sexuality; and teaches skills for making responsible decisions, including how to avoid unwanted verbal, physical, and sexual advances and how not to make unwanted verbal, physical, and sexual advances. It should also be culturally balanced. Presently Connecticut has no designated funding stream for comprehensive sexuality education in schools. Parents tend to assume their students are receiving this type of education in school while school systems are assuming students are receiving this type of education at home. You know what happens when you assume? As illustrated above, you get high teen pregnancy rates, an alarmingly high rate of STDs among youth, and the continued risk of HIV transmission among teens and young adults. These trends also impact services provided by various state departments (Social Services, Public Health, Education, Children and Families, Mental Health and Addiction Services, etc.)

Please know this legislation would not require school districts to teach sex education. It allows for communities to voluntarily apply for sex education grants from the \$1 million fund controlled by the State Department of Education. Connecticut's teens need to be safe and informed. The Healthy Teens Act seeks to promote communication and responsible decision-making in regard to sexual health.

In Connecticut, there is no dedicated funding for **comprehensive** sex education programs that work. It makes no sense to fund "abstinence-only" programs which studies have shown do not reduce the number of teen pregnancies or sexually transmitted infections and HIV/AIDS. Despite recent declines in teen pregnancy, U.S. teen births and infection rate of STDs remain among the highest in the western world. Numerous studies have shown that both community-based and school-based sex education programs which incorporate abstinence and contraception (some with additional reproductive health services) are effective in preventing teen pregnancy, HIV infection, and STD transmission among youth. Success rates are measured in risk avoidance through abstinence, risk reduction for sexually active youth, and reduction in teen pregnancy or STIs (sexually

⁵ State of Connecticut, Department of Public Health, Connecticut School Health Survey (2005)

transmitted infections) Programs such as: <u>Teenstar</u> (reduced pregnancy through information about abstinence and contraception), Safer Choices (HIV/STI and teen pregnancy prevention program) and <u>SiHLE</u> (reduced incidence of STDs and teen pregnancy as well as an increase in sexually responsible behavior such as increased condom use and reduced number of sex partners) have been evaluated and proven effective.⁶

Professional medical and public health organization support this type of legislation and I implore you, my elected public officials to do the same. Please ensure Connecticut's youth have access to medically accurate, ageappropriate sex education. Please support Bill No: 5591.

I sincerely appreciate having the opportunity to speak about this issue and would very happy to answer any questions.

⁶ Science and Success: Supplement 1: Additional Sex Education and Other Programs that Work to Prevent Teen Pregnancy, HIV & Sexually Transmitted Infections as retrieved on February 25, 2008 from http://www.advocatesforyouth.org/publications/sciencesuccess_supplement.htm.